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UTILITY PATENT APPLICATION TRANSMITTAL

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney Docket No.	
First Inventor	Tomoaki Koseki
Title	Surgical suture material formed with needle insert-mould method
Evoress Mail I abel No.	FF 007454417 JP

		Express Mail Label No. L(• •	<u> </u>						
See MPEP ch	APPLICATION ELEMENTS napter 600 concerning utility patent application contents.	ADDRESS TO: Commiss P.O. Box	Patent Application ioner for Patents 1450 a VA 22313-1450						
(Submit a Applican See 37 3. V Specific (prefere - Descrip - Cross F - Statem - Refere or a cor - Backgr - Brief St - Bri	Insmittal Form (e.g., PTO/SB/17) an original and a duplicate for fee processing) Int claims small entity status. CFR 1.27. Cation [Total Pages 5] I darrangement set forth below) Dive title of the invention Reference to Related Applications Ince to sequence listing, a table, Imputer program listing appendix Fround of the Invention I ummary of the Invention I ummary of the Invention I ummary of the Drawings (if filed) I do Description	ii. Paper	sequence Submission orm (CRF) OLA 'S' D-R (2 copies); or g identity of above copies						
- Claim(s		ACCOMPANYING APPLICATION PARTS							
4. Drawing 5. Oath or Decla a. New b. Copy (for c i. E Si n 1 6. Applic 18. If a CONTIN specification folic Prior application in For CONTINUATIC 5b, is considered	y from a prior application (37 CFR 1.63(d)) continuation/divisional with Box 18 completed) DELETION OF INVENTOR(S) igned statement attached deleting inventor(s) ame in the prior application, see 37 CFR .63(d)(2) and 1.33(b). cation Data Sheet. See 37 CFR 1.76 IUING APPLICATION, check appropriate box, and suppowing the title, or in an Application Data Sheet under 3 uation Divisional Continuation: Examiner ON OF DIVISIONAL APPS only; The entire disclosure of the	9. Assignment Papers (cover sheet & document(s)) 10. 37 CFR 3.73(b) Statement Power of (when there is an assignee) Attorney 11. English Translation Document (if applicable) 12. Information Disclosure Copies of IDS Statement (IDS)/PTO-1449 Citations Preliminary Amendment 14. Return Receipt Postcard (MPEP 503) (Should be specifically itemized) 15. Certified Copy of Priority Document(s) (if foreign priority is claimed) Nonpublication Request under 35 U.S.C. 122 (b)(2)(B)(i). Applicant must attach form PTO/SB/35 or its equivalent. Other: Art Unit: Tele prior application, from which an oath or declaration is supplied under Box and or divisional application and is hereby incorporated by reference.							
	19. CORRESPON	DENCE ADDRESS							
☐ Custome	er Number:	OR 🗹 Corre	spondence address below						
Name	Tomoaki Koseki								
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Country		Telephone 81-3-3526-4157	Fax 81-3-3526-4450						
Name (Print/Typ		Registration No. (Attorney/Agent)	F17 73 - 0 713						
Signature	10/1904 (1)	r togratiation No. (Attorney/Agent)	Date of Con 2003						
Jigirature	T. Koseki		Date 26 Sep 2003						

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Signature

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for FY 2003 Effective 01/01/2003. Patent fees are subject to annual revision.			Filing Date							
						r Tomoal	ki Koseki			
Effective Unu ii 2003. Patent lees a	re subject to annual revision.		Exam	iner Na	ıme					
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**or number previously paid, if greater;	uceo by	Dasic F	mng Fee	raiu S	SUBTOTAL	(3) (\$)				
SUBMITTED BY (Complete (if applicable)										
Name (Print/Type) Tomoaki Koseki			Registra Attorney/	tion No. (Agent)			Telephone	03-3526-4151		
Signature T. Koselci							Date	26 Sep	2003	

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